

Research in Progress Conference for Hospitalists Provides Valuable Peer Mentoring

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BACKGROUND: Many academic hospitalist units lack senior mentors. In such groups, peer mentoring may be valuable. To formalize collaboration, we instituted a research-in-progress conference at our institution, and this article describes the format and evaluation data.

METHODS: The research-in-progress sessions were held every 3 to 4 weeks and followed a specific format. Evaluation forms were completed after each of the 15 sessions during the 2009 academic year. Attendees and presenters completed surveys at the end of the sessions. The projects presented were tracked for successful academic outcomes, namely, publication in a peer-reviewed journal or presentation at a national meeting.

RESULTS: A mean of 9.6 persons were present at each session and completed the evaluations. All 15 presenters rated the climate of the sessions as extremely supportive, and 86% believed they were helpful in advancing their project. A total of 143 evaluations were completed by the attendees, 86% and 96% of whom found the sessions to be intellectually stimulating and to have satisfactorily kept them abreast of their colleagues' scholarly pursuits, respectively. To date, 10 of the 15 projects have translated into successful academic outcomes: 6 peer-reviewed publications and 4 other presentations presented at national meetings.

CONCLUSIONS: The research-in-progress conference has been well received and has resulted in academic productivity within our hospitalist division. It is likely that such a conference will be most valuable for groups with limited access to senior mentors. *Journal of Hospital Medicine* 2011;6:43–46 © 2011 Society of Hospital Medicine

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Additional Supporting Information may be found in the online version of this article.

The research-in-progress (RIP) conference is commonplace in academia, but there are no studies that objectively characterize its value. Bringing faculty together away from revenue-generating activities carries a significant cost. As such, measuring the success of such gatherings is necessary.

Mentors are an invaluable influence on the careers of junior faculty members, helping them to produce high-quality research.^{1–3} Unfortunately, some divisions lack mentorship to support the academic needs of less experienced faculty.¹ Peer mentorship may be a solution. RIP sessions represent an opportunity to intentionally formalize peer mentoring. Further, these sessions can facilitate collaborations as individuals become aware of colleagues' interests. The goal of this study was to assess the value of the research-in-progress conference initiated within the hospitalist division at our institution.

Methods

Study Design

This cohort study was conducted to evaluate the value of the RIP conference among hospitalists in our division and the academic outcomes of the projects.

Setting and Participants

The study took place at Johns Hopkins Bayview Medical Center (JHBMC), a 335-bed university-affiliated medical center in Baltimore, Maryland. The hospitalist division consists of faculty physicians, nurse practitioners, and physician assistants (20.06 FTE physicians and 7.41 FTE midlevel providers). Twelve (54%) of our faculty members are female, and the mean age of providers is 35.7 years. The providers have been practicing hospitalist medicine for 3.0 years on average; 2 (9%) are clinical associates, 16 (73%) are instructors, and 3 (14%) are assistant professors.

All faculty members presenting at the RIP session were members of the division. A senior faculty member (a professor in the Division of General Internal Medicine) helps to coordinate the conference. The group's research assistant was present at the sessions and was charged with data collection and collation.

The Johns Hopkins University institutional review board approved the study.

The Research in Progress Conference

During the 2009 academic year, our division held 15 RIP sessions. At each session, 1 faculty member presented a

TABLE 1. Details About RIP Sessions Held During 2009 Academic Year

Session	Date	Presenter	Topic	Evaluations Completed
1	7/2008	Dr. CS	Hospital medicine in Canada versus the United States	7
2	7/2008	Dr. RT	Procedures by hospitalists	9
3	8/2008	Dr. MA	<i>Clostridium difficile</i> treatment in the hospital	11
4	8/2008	Dr. EH	Active bed management	6
5	9/2008	Dr. AS	Medication reconciliation for geriatric inpatients	10
6	9/2008	Dr. DT	Time-motion study of hospitalists	10
7	10/2008	Dr. KV	e-Triage pilot	16
8	11/2008	Dr. EH	Assessing clinical performance of hospitalists	7
9	12/2008	Dr. SC	Trends and implications of hospitalists' morale	8
10	1/2009	Dr. TB	Lessons learned: tracking urinary catheter use at Bayview	11
11	2/2009	Dr. FK	Utilizing audit and feedback to improve performance in tobacco dependence counseling	12
12	3/2009	Dr. MK	Survivorship care plans	7
13	4/2009	Dr. DK	Outpatient provider preference for discharge summary format/style/length	7
14	5/2009	Dr. RW	Comparing preoperative consults done by hospitalists and cardiologists	11
15	6/2009	Dr. AK	Development of Web-based messaging tool for providers	12

research proposal. The goal of each session was to provide a forum where faculty members could share their research ideas (specific aims, hypotheses, planned design, outcome measures, analytic plans, and preliminary results [if applicable]) in order to receive feedback. The senior faculty member met with the presenter prior to each session in order to: (1) ensure that half the RIP time was reserved for discussion and (2) review the presenter's goals so these would be made explicit to peers. The coordinator of the RIP conference facilitated the discussion, solicited input from all attendees, and encouraged constructive criticism.

Evaluation, Data Collection, and Analysis

At the end of each session, attendees (who were exclusively members of the hospitalist division) were asked to complete an anonymous survey. The 1-page instrument was designed (1) with input from curriculum development experts⁴ and (2) after a review of the literature about RIP conferences. These steps conferred content validity to the instrument, which assessed perceptions about the session's quality and what was learned. Five-point Likert scales were used to characterize the conference's success in several areas, including "being intellectually/professionally stimulating" and "keeping them apprised of their colleagues' interests." The survey also assessed the participatory nature of the conference (balance of presentation vs discussion), its climate (extremely critical vs extremely supportive), and how the conference assisted the presenter. The presenters completed a distinct survey related to how helpful the conference was in improving/enhancing their projects. A final open-ended section invited additional comments. The instrument was piloted and iteratively revised before its use in this study.

For the projects presented, we assessed the percentage that resulted in a peer-reviewed publication or a presentation at a national meeting.

Results

The mean number of attendees at the RIP sessions was 9.6 persons. A total of 143 evaluations were completed. All 15 presenters (100%) completed their assessments. The research ideas presented spanned a breadth of topics in clinical research, quality improvement, policy, and professional development (Table 1).

Presenter Perspective

All 15 presenters (100%) felt "a lot" or "tremendously" supported during their sessions. Thirteen physicians (86%) believed that the sessions were "a lot" or "tremendously" helpful in advancing their projects. The presenters believed that the guidance and discussions related to their research ideas, aims, hypotheses, and plans were most helpful for advancing their projects (Table 2).

Examples of the written comments are:

"... I was overwhelmed by how engaged people were in my project."

"The process of preparing for the session and then the discussion both helped my thinking. Colleagues were very supportive."

"I am so glad I heard these comments and received this feedback now, rather than from peer reviewers selected by a journal to review my study. It would have been a much more difficult situation to fix at that later time."

Attendee Perspective

The majority of attendees (123 of 143, 86%) found the sessions to be "a lot" or "extremely" stimulating, and almost all (96%) were "a lot" or "extremely" satisfied with how the RIP sessions kept them abreast of their colleagues' academic interests. In addition, 92% judged the session's climate to be "a lot" or "extremely" supportive, and 88% deemed the balance of presentation to discussion to be "just right." Attendees believed that they were most helpful to the presenter in terms of conceiving "ideas for alternative methods to be

TABLE 2. Perspectives from the 15 Presenters About Research-in-Progress Session

	Not at All, n (%)	A Little, n (%)	Some, n (%)	A Lot, n (%)	Tremendously, n (%)
General questions:					
Intellectually/professionally stimulating	0 (0)	0 (0)	0 (0)	5 (33)	10 (66)
Feeling supported by your colleagues in your scholarly pursuits	0 (0)	0 (0)	0 (0)	4 (27)	11 (73)
Session helpful in the following areas:					
Advancing your project	0 (0)	0 (0)	2 (13)	5 (33)	8 (53)
Generated new hypotheses	1 (6)	3 (20)	5 (33)	5 (33)	1 (6)
Clarification of research questions	0 (0)	2 (13)	4 (27)	7 (47)	2 (13)
Ideas for alternate methods	1 (6)	1 (6)	2 (13)	7 (47)	4 (27)
New outcomes suggested	1 (6)	2 (13)	2 (13)	5 (33)	5 (33)
Strategies to improve or enhance data collection	0 (0)	2 (13)	0 (0)	8 (53)	5 (33)
Suggestions for alternate analyses or analytical strategies	1 (1)	1 (6)	4 (27)	5 (33)	4 (27)
Input into what is most novel/interesting about this work	0 (0)	2 (13)	3 (20)	6 (40)	4 (27)
Guidance about the implications of the work	1 (6)	2 (13)	1 (6)	7 (47)	4 (27)
Ideas about next steps or future direction/studies	0 (0)	0 (0)	3 (21)	8 (57)	3 (21)

TABLE 3. Perspectives from the 143 Attendees Who Completed Evaluations About How the Research-in-Progress Session Was Helpful to the Presenter

Insight Offered	n (%)
Ideas for alternate methods	92 (64%)
Strategies to improve data collection	85 (59.4%)
New hypotheses generated	84 (58.7%)
Ideas for next steps/future direction/studies	83 (58%)
New outcomes suggested that should be considered	69 (48%)
Clarification of the research questions	61 (43%)
Input about what is most novel/interesting about the work	60 (42%)
Guidance about the real implications of the work	59 (41%)
Suggestions for alternate analyses or analytical strategies	51 (36%)

used” to answer the research question and in providing “strategies to improve data collection” (Table 3).

The free text comments primarily addressed how the presenters’ research ideas were helped by the session:

“There were great ideas for improvement—including practical approaches for recruitment.”

“The session made me think of the daily routine things that we do that could be studied.”

“There were some great ideas to help Dr. A make the study more simple, doable, and practical. There were also some good ideas regarding potential sources of funding.”

Academic Success

Of the 15 projects, 6 have been published in peer-reviewed journals as first- or senior-authored publications.^{5–10} Of these, 3 were presented at national meetings prior to publication. Four additional projects have been presented at a national society’s annual meeting, all of which are being prepared for publication. Of the remaining 5 presentations, 4 were terminated because of the low likelihood of academic success. The remaining project is ongoing.

Comparatively, scholarly output in the prior year by the 24 physicians in the hospitalist group was 4 first- or senior-authored publications in peer-reviewed journals and 3 presentations at national meetings.

Discussion

In this article, we report our experience with the RIP conference. The sessions were perceived to be intellectually stimulating and supportive, whereas the discussions proved helpful in advancing project ideas. Ample discussion time and good attendance were thought to be critical to the success.

To our knowledge, this is the first article gathering feedback from attendees and presenters at a RIP conference and to track academic outcomes. Several types of meetings have been established within faculty and trainee groups to support and encourage scholarly activities.^{11,12} The benefits of peer collaboration and peer mentoring have been described in the literature.^{13,14} For example, Edwards described the success of “shortstop” meetings among small groups of faculty members every 4–6 weeks in which discussions of research projects and mutual feedback would occur.¹⁵ Santucci described peer-mentored research development meetings, with increased research productivity.¹²

Mentoring is critically important for academic success in medicine.^{16–19} When divisions have limited senior mentors available, peer mentoring has proven to be indispensable as a mechanism to support faculty members.^{20–22} The RIP conference provided a forum for peer mentoring and provided a partial solution to the limited resource of experienced research mentors in the division. The RIP sessions appear to have helped to bring the majority of presented ideas to academic fruition. Perhaps even more important, the sessions were able to terminate studies judged to have low “academic promise” before the faculty had invested significant time.

Several limitations of our study should be considered. First, this study involved a research-in-progress conference coordinated for a group of hospitalist physicians at 1 institution, and the results may not be generalizable. Second,

although attendance was good at each conference, some faculty members did not come to many sessions. It is possible that those not attending may have rated the sessions differently. Session evaluations were anonymous, and we do not know whether specific attendees rated all sessions highly, thereby resulting in some degree of clustering. Third, this study did not compare the effectiveness of the RIP conference with other peer-mentorship models. Finally, our study was uncontrolled. Although it would not be possible to restrict specific faculty from presenting at or attending the RIP conference, we intend to more carefully collect attendance data to see whether there might be a dose-response effect with respect to participation in this conference and academic success.

In conclusion, our RIP conference was perceived as valuable by our group and was associated with academic success. In our division, the RIP conference serves as a way to operationalize peer mentoring. Our findings may help other groups to refine either the focus or format of their RIP sessions and those wishing to initiate such a conference.

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